

CP 2.2 Initial Specimen Collection: Hospital Births

POLICY:

1. All newborns born in California must have newborn screening per state regulations and protocols generated by the Newborn Screening Clinical Support Branch, Genetic Disease Screening Program (GDSP) of the California Department of Public Health (CDPH).
2. Hospital staff shall ensure that all newborns have a screening specimen collected according to California regulations and NBS protocols OR that mother/parents/legal guardians have been informed about the test and have refused it.
3. The only legitimate reason for refusal of the Newborn Screening test is that it conflicts with parents' religious beliefs or practices. Parents who refuse will be asked to sign the *Newborn Screening Test Refusal (NBS-TR)* form. A Hospital Report of *Newborn Screening Specimen Not Obtained (NBS-NO)* should also be completed and distributed as indicated on the form.
4. Perinatal health facilities and primary care providers must assure that their staff are informed and properly trained in carrying out NBS protocols. Newborn Screening Area Service Center professional staff is available to provide NBS training, consultation and technical assistance.
5. If a newborn is discharged or transferred to another licensed facility without collecting a newborn screening specimen, a *Hospital Report of Newborn Screening Not Obtained (NBS-NO)* shall be completed by the transferring hospital and distributed per instructions on the form. If an infant is transferred before 6 days of age, it is the **receiving** hospital's responsibility to ensure that a specimen has been or is collected.
6. Newborn Screening regulations do not apply (i.e., screening is not required) if the newborn has a condition almost certain to be fatal in the first thirty (30) days of life. This fact shall be documented in the newborn's medical record.

2.2 (Cont'd.) Initial Specimen Collection: Hospital Births

PROTOCOL:

Resp. Person	Action
Prenatal Care Provider/Labor & Delivery Staff/ Antepartum/ Postpartum Staff	<ul style="list-style-type: none"> • During the third trimester of prenatal care and upon admission for delivery, provides woman/parents with copy of Newborn Screening Program booklet entitled “<i>Important Information for Parents about the Newborn Screening Test</i>”. • Answers any questions about newborn screening and explains its importance.
Hospital Perinatal Staff or Lab Staff	<ul style="list-style-type: none"> • Within time frames as outlined in <i>Dried Blood Spot Collection protocol</i>, assures proper collection and handling of newborn screening specimen and transport to appropriate NAPS Lab per regulations or, if parents/legal guardians refuse testing, completes <i>Newborn Screening Test Refusal (NBS-TR)</i> and obtains signature. Also completes a <i>Hospital Report of Newborn Screening Specimen Not Obtained (NBS-NO)</i> and distributes per instructions on the form. • If newborn is transferred to another licensed health care facility without having a newborn screening specimen collected, completes “<i>Hospital Report of Newborn Screening Not Obtained</i>” (NBS-NO) and distributes copies per instructions on form.
Health Information Management (Medical Records) Staff or as designated by the Health Care Facility	<ul style="list-style-type: none"> • 14 days from date of newborn’s discharge from hospital, reviews medical records for presence of Result Mailer or <i>Newborn Screening Test Refusal (NBS-TR)</i> form. • If no record of screening or refusal found, completes “<i>Hospital Report of Newborn Screening Not Obtained</i>” (NBS-NO) form and distributes per instructions on the form. • If there is a record of screening (Sender’s copy of TRF) but Result Mailer has not been received, completes <i>Provider Request for Missing Newborn Screening Results (NBS-MR)</i> form and submits to GDSP NBS Program Technician.